

PROVISO

SUBCOMMITTEE

RECOMMENDATIONS

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HEALTH CARE

**PROVISO SUBCOMMITTEE
HEALTH CARE
RECOMMENDATIONS FOR FY 2012-13
TO THE HOUSE WAYS AND MEANS COMMITTEE**

SECTION 20 - H73-DEPARTMENT OF VOCATIONAL REHABILITATION

20.1 **AMEND** (Production Contracts Revenue) Provides for the retention and use of production contracts revenues earned by handicapped trainees.

PROVISO SUBCOMMITTEE RECOMMENDATION: AMEND proviso to reference to “handicapped trainees of the Evaluation and Training Facilities (Workshops)” to “people with disabilities receiving job readiness training at the agency’s Work Training Centers.” *Technical to update terminology.* Fiscal Impact: No impact on the General Fund. Requested by Department of Vocational Rehabilitation.

20.1. (VR: Production Contracts Revenue) All revenues derived from production contracts earned by ~~the handicapped trainees of the Evaluation and Training Facilities (Workshops)~~ *people with disabilities receiving job readiness training at the agency’s Work Training Centers* may be retained by the State Agency of Vocational Rehabilitation and used in the facilities for Client Wages and any other production costs; and further, any excess funds derived from these production contracts may be used for other operating expenses and/or permanent improvements of these facilities.

20.3 **DELETE** (Basic Support Program Reconciliation) Requires the department complete a reconciliation of the cost to operate the Basic Support program relative to the combination of available state and federal funds.

PROVISO SUBCOMMITTEE RECOMMENDATION: DELETE proviso. *The proviso is no longer relevant due to the Federal Cash Management Act.* Fiscal Impact: No impact on the General Fund. Requested by Department of Vocational Rehabilitation.

20.3. (VR: Basic Support Program Reconciliation) ~~The General Assembly hereby directs the Department of Vocational Rehabilitation to complete a reconciliation of the cost to operate the Basic Support program related to the combination of state and federal funds available following the close of each federal fiscal year. Such reconciliation shall begin with the federal fiscal year ending September 30, 1989. Federal funds participation for that period shall be applied at the maximum allowable percentage and the level of those funds on hand which have resulted from the over participation of state funds shall be remitted to the general fund within one hundred twenty days following the close of the federal fiscal year. This reconciliation and subsequent remission to the general fund shall be reviewed by the State Auditor to ensure that appropriate federal/state percentages are applied. It is the intent of the General Assembly that federal/state percentages budgeted and appropriated shall in no way be construed as authorization for the department to retain the federal funds involved.~~

SECTION 21 - J02-DEPARTMENT OF HEALTH AND HUMAN SERVICES

21.14 **DELETE** (Medicaid Cost Savings Suggestion Award Program) Authorizes the department to establish a cost savings award program for employees of Medicaid providers who offer money saving ideas that are adopted. Directs that department employees are not eligible. Limits the amount of funds used for this program to \$20,000 annually.

PROVISO SUBCOMMITTEE RECOMMENDATION: DELETE proviso. *No cost savings ideas have been adopted as a result of this proviso.* Fiscal Impact: No impact on the General Fund. Requested by Department of Health and Human Services.

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~~21.14. (DHHS: Medicaid Cost Savings Suggestion Award Program) The department is authorized to provide cash or honorary awards to employees of Medicaid providers whose suggestion is adopted by the committee administering the Medicaid Cost Savings Suggestion Award Program that will result in savings of state or federal dollars. Employees of the department are not eligible for cash awards. The department is authorized to fund this program from revenue from third party liability collections. The maximum amount of funds that may be used annually for the program is \$20,000.~~

- 21.20 DELETE** (Pediatric Literacy Program) Requires the department to assist any non-profit pediatric literacy program, upon request, to expand its operations.
PROVISO SUBCOMMITTEE RECOMMENDATION: DELETE proviso. *The agency complied with this provisions several years ago, and has not been approached by any such non-profits since.* Fiscal Impact: No impact on the General Fund. Requested by Department of Health and Human Services.

~~21.20. (DHHS: Pediatric Literacy Program) The department shall coordinate with any pediatric, non-profit early literacy program, upon request of such program, to identify program participants who are also enrolled as Medicaid providers and, to the extent possible based on data available to the department, work with the program to determine potential geographic areas for program expansion.~~

- 21.22 DELETE** (Modular Ramps) Authorizes the department to lease modular ramps if they would be cost effective.
PROVISO SUBCOMMITTEE RECOMMENDATION: DELETE proviso. *Permissive proviso not necessary; agency can pursue any cost-effective strategies such as ramp leases without the proviso.* Fiscal Impact: No impact on the General Fund. Requested by Department of Health and Human Services.

~~21.22. (DHHS: Modular Ramps) The Department of Health and Human Services is authorized to lease modular ramps in the event the department can foresee demonstrated cost-savings to the department.~~

- 21.23 AMEND** (Medicaid Cost and Quality Effectiveness) Requires the department to compare coordinated care models and fee-for-service for quality and cost-effectiveness; prescribes the process for such comparison; and requires the report and plan report cards be made public.
PROVISO SUBCOMMITTEE RECOMMENDATION: AMEND proviso to delete the requirement that the reports be posted on the department's website "no later than ninety days after the end of each fiscal year" and instead direct that they be posted "by December 31 for the prior state fiscal year." *Allow time to collect data to present a report on the entire prior fiscal year. As written, there is not enough time to collect necessary medical claims data to present a report on the previous fiscal year.* Fiscal Impact: No impact on the General Fund. Requested by Department of Health and Human Services.

21.23. (DHHS: Medicaid Cost and Quality Effectiveness) The Department of Health and Human Services shall establish a procedure to assess the various forms of managed care (Health Maintenance Organizations and Medical Home Networks), and any other forms authorized by the department) to measure cost effectiveness and quality. These measures must be compiled on an annual basis. The Healthcare Effectiveness Data and Information Set (HEDIS) shall be utilized for quality measurement and must be performed by an independent

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third party according to HEDIS guidelines. Cost effectiveness shall be determined in an actuarially sound manner and data must be aggregated in a manner to be determined by a third party in order to adequately compare cost effectiveness of the different managed care programs versus Medicaid fee-for-service. The methodology must use appropriate case-mix and actuarial adjustments that allow cost comparison of managed care organizations, medical home networks, and fee-for-service. The department shall issue annual healthcare report cards for each participating Medicaid managed care plan and Medical Home Network operating in South Carolina and the Medicaid fee-for-service program. The report card measures shall be developed by the department and the report card shall be formatted in a clear, concise manner in order to be easily understood by Medicaid beneficiaries. The results of the cost effectiveness calculations, quality measures and the report cards shall be made public on the department's website ~~no later than ninety days after the end of each~~ by December 31 for the prior state fiscal year.

- 21.26** **AMEND** (Medicaid Provider Fraud) Requires the department to expand and increase its Medicaid provider fraud efforts and to report on the results of its efforts to the General Assembly by April 1, 2012.

PROVISO SUBCOMMITTEE RECOMMENDATION: AMEND proviso to change "2012" to "2013." *Technical.* Fiscal Impact: No impact on the General Fund.

21.26. (DHHS: Medicaid Provider Fraud) The department shall expand and increase its effort to identify, report, and combat Medicaid provider fraud. The department shall report to the General Assembly before April 1, ~~2012~~ 2013 on the results of these efforts, funds recuperated or saved, and information pertaining to prosecutions of such actions, including pleas agreements entered into.

- 21.29** **AMEND** (GAPS) Requires the department to suspend GAPS requirements for the FY 11-12. **PROVISO SUBCOMMITTEE RECOMMENDATION:** AMEND proviso to change Fiscal Year "2011-12" to "2012-13." *GAPS is the GAP Assistance Pharmacy Program for Seniors, and is no longer a funded line item in DHHS budget.* Fiscal Impact: No impact on the General Fund.

21.29. (DHHS: GAPS) The requirements of Title 44, Chapter 6-610 through Chapter 6-660 shall be suspended for Fiscal Year ~~2011-12~~ 2012-13.

- 21.31** **AMEND** (In-Home Health Care Systems for Medicaid Recipients) Allows the department to pilot test a program using an in-home health care system, with the goal of reducing emergency room visits; and provides specifics that to be used for the program.

PROVISO SUBCOMMITTEE RECOMMENDATION: AMEND proviso to change Fiscal Year "2011-12" to "2012-13." *Technical.* Fiscal Impact: No impact on the General Fund.

21.31. (DHHS: In-Home Health Care Systems for Medicaid Recipients) The Department of Health and Human Services, during Fiscal Year ~~2011-12~~ 2012-13, within the funds appropriated, upon application by the department, may pilot test an in-home health care system. The pilot test must include a statistically valid sample of Medicaid patients within the counties as determined by the Director of the Department of Health and Human Services. This program shall provide a state-of-the-art in-home health care system which provides around the clock access to medical assessment care and additionally provides an emergency response function that gives a Medicaid recipient the ability to contact a local emergency response center.

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The purpose of the program is to reduce the amount of emergency room visits in non-emergency cases and to reduce the amount of visits to other medical care facilities in order to save on the cost of providing this care and in order to provide better health care.

The in-home health care system option must consist of three main components:

- (1)the medical console and wireless transmitter;
- (2)the medical triage center; and
- (3)the emergency response call center.

The medical console and wireless transmitter must have the following capabilities:

(1)the medical console must be capable of communication between two separate call centers, one of which is a monitoring facility to provide certified medical triage care twenty-four hours a day and the other of which is a monitoring facility to provide emergency response services twenty-four hours a day.

(2)the wireless transmitter for the medical console must have two buttons, one for transmitting a signal to the console to contact the emergency response monitoring facility, and the second button also must send a wireless signal to the console to trigger contact with the medical triage center.

(3)the medical console must be able to send a report/event code to the emergency response call center after a medical triage center call has been placed.

(4)an emergency button on the medical console must include Braille for the sight impaired.

The medical triage center must have or be:

- (1)open twenty-four hours a day, three hundred sixty-five days a year;
- (2)a call center must be located in the United States;
- (3)Utilization Review Accreditation Commission (URAC) accredited;
- (4)on call availability of a South Carolina licensed physician, twenty-four hours, seven days a week for guidance or review of clinical calls as needed;
- (5)registered nurses with a minimum of ten years experience available to answer all calls;
- (6)all calls digitally recorded and archived, and a triage report prepared and sent;
- (7)daily monitoring of communications with the call center;
- (8)fully HIPAA compliant;
- (9)bilingual staff in English and Spanish;
- (10) a mechanism that ensures that a caller will never receive a busy signal or voice mail when accessing the nurse advice line;
- (11) clinical staff able to serve pediatric, adolescent, adult, and senior populations, as well as health care expertise in a variety of clinical areas such as emergency room, pediatrics, critical care, oncology, cardiology, pulmonary, geriatrics, obstetrics/gynecology and general medicine; and
- (12) the infrastructure in place to allow the telephone network to digitally communicate with the medical console for incoming call connection, call disconnect, and client file access.

The emergency response call center must:

- (1)be open twenty-four hours a day, three hundred sixty-five days a year;
- (2)be located in South Carolina;
- (3)maintain a digital receiver capable of processing two-way voice audio using multiple formats.

Facilities, emergency response and the medical triage center, shall offer all recipients selected by the department unlimited use of services provided by the emergency monitoring and medical triage facilities at no additional cost burden to the State.

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The pilot-testing program must be conducted for the current fiscal year. The department in developing and administering this program is authorized to take such actions as may be required, including making requests for Medicaid waivers when necessary.

The department, in implementing this program on a pilot-testing basis, also is authorized to contract with a third-party provider or vendor to furnish and operate the program or a physician's office that provides a similar patient service.

21.32 AMEND (Medicaid Reporting) Directs the department to report quarterly all cost-saving measures they have implemented.

PROVISO SUBCOMMITTEE RECOMMENDATION: AMEND proviso to change Fiscal Year "2011-12" to "2012-13." *Technical.* Fiscal Impact: No impact on the General Fund.

21.32. (DHHS: Medicaid Reporting) Within ninety days of the end of each quarter in Fiscal Year ~~2011-12~~ 2012-13, the department shall report each cost-savings measure implemented. By county, the department shall report the number of enrolled and active providers by provider type, provider specialty and sub-specialty, the number of recipients, the number of recipients by provider type, the expenditures by provider type and specialty, and service level utilization trends. The department shall continue to annually report HEDIS measures, noting where measures improve or decline. Each report shall be submitted to the Chairman of the Senate Finance Committee, the Chairman of the Ways and Means Committee, the President Pro Tempore of the Senate, and the Speaker of the House of Representatives, and be prominently displayed on the department's website.

SECTION 22 - J04-DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

22.6 DELETE (Speech & Hearing) Require the department to their appropriated funds as necessary to continue Speech and Hearing programs.

PROVISO SUBCOMMITTEE RECOMMENDATION: DELETE proviso. *Funds for these programs are a special line item rendering the proviso unnecessary.* Fiscal Impact: No impact on the General Fund. Requested by Department of Health and Environmental Control.

~~**22.6.** (DHEC: Speech & Hearing) The Department of Health and Environmental Control shall utilize so much of the funds appropriated in this section as may be necessary to continue the Speech and Hearing programs.~~

22.9 AMEND (Emergency Medical Services) Provides for the allocation of Emergency Medical Services funds.

PROVISO SUBCOMMITTEE RECOMMENDATION: AMEND proviso to delete specific reference to appropriation of "\$1,234,288." *During the budget process these funds will be placed on a special line item rendering a specified amount necessary.* Fiscal Impact: No impact on the General Fund. Requested by Department of Health and Environmental Control.

22.9. (DHEC: Emergency Medical Services) Funds appropriated herein for Emergency Medical Services, shall be allocated for the purpose of improving and upgrading the EMS system throughout the state. The monies allocated to the Counties are for the purpose of improving or upgrading the local EMS system through the licensed ambulance services, the monies allocated to the EMS Regional Councils are for the administration of training programs and technical assistance to local EMS organizations and county systems. All additional funds

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are to be allocated as follows: to the counties at the ratio of eighty-one percent of the additional funds appropriated herein, to the EMS Regions at a ratio of twelve percent of the additional funds appropriated herein and to the state EMS Office at the ratio of seven percent of the additional funds appropriated herein. The Department of Health and Environmental Control shall develop criteria and guidelines and administer the system to make allocations to each region and county within the state, based on demonstrated need and local match. Funds appropriated, ~~\$1,234,288~~, to Emergency Medical Services shall not be transferred to other programs within the department's budget. Unexpended funds appropriated to the program may be carried forward to succeeding fiscal years and expended for administrative and operational support and for temporary and contract employees to assist with duties related to improving and upgrading the EMS system throughout the state, including training of EMS personnel and administration of grants to local EMS providers. In addition, when instructed by the Budget and Control Board or the General Assembly to reduce funds by a certain percentage, the department may not reduce the funds appropriated for EMS Regional Councils or Aid to Counties greater than such stipulated percentage.

- 22.25** **DELETE** (Health Disparities Study-State Health Plan for Elimination of Health Disparities) Directs the department to provide leadership in implementing the State Health Improvement Plan for eliminating health disparities.

PROVISO SUBCOMMITTEE RECOMMENDATION: DELETE proviso. *A report and plan have been developed.* Fiscal Impact: No impact on the General Fund. Requested by Department of Health and Environmental Control.

~~22.25. (DHEC: Health Disparities Study-State Health Plan for Elimination of Health Disparities) The Department of Health and Environmental Control will provide leadership in the implementation of the State Health Improvement Plan for the elimination of health disparities with specific goals similar to the national Healthy People 2010 goals and targeting health disparities among our state's minority population. The Plan will address the areas of diabetes, heart disease, stroke, cancer, HIV/AIDS, infant mortality and childhood/adult immunizations. Working with public and private health care institutions, state agencies and providers, DHEC will provide leadership in the coordination of services, elimination of duplication and coordination of federal and state funding.~~

- 22.26** **DELETE** (Head Lice) Authorizes the department to spend \$200,000 of revenue to fund the head lice program statewide.

PROVISO SUBCOMMITTEE RECOMMENDATION: DELETE proviso. *The agency is mandated to respond to any significant public health outbreak based on need and the direct threat to the public.* Fiscal Impact: No impact on the General Fund. Requested by Department of Health and Environmental Control.

~~22.26. (DHEC: Head Lice) The Department of Health and Environmental Control is authorized to expend \$200,000 in other fund accounts in order to fund the head lice program statewide.~~

- 22.37** **DELETE** (Hemophilia Recombinant Factors) Requires the department, when a physician prescribes recombinant factors for Hemophilia patients, to provide the patient with a choice of recombinant factors regardless of their past Hemophilia treatment.

PROVISO SUBCOMMITTEE RECOMMENDATION: DELETE proviso. *Actions specified by the proviso have been implemented and the agency would support the treatment*

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specified by the physician. Fiscal Impact: No impact on the General Fund. Requested by Department of Health and Environmental Control.

~~22.37. (DHEC: Hemophilia Recombinant Factors) The Department of Health and Environmental Control shall provide patients with Hemophilia the choice of recombinant factors when prescribed by a physician regardless of the patient's past Hemophilia treatment methods.~~

22.aec **ADD** (Abstinence Education Contract) **PROVISO SUBCOMMITTEE RECOMMENDATION:** ADD new proviso to require the department to continue to fund, with federal and matching funds under Title V, Section 501, their Abstinence Education Contract with the same provider and at the same level of funds that was in effect as of December 2012. Fiscal Impact: No impact on the General Fund.

22.aec. (DHEC: Abstinence Education Contract) The agencies under contract with the State of South Carolina as of December 2012 and funded with federal and matching funds under the provisions of Title V, Section 510, must continue to be under contract at the same funding level, for the same purposes for the current fiscal year of 2012-13.

22.vr **ADD** (Vital Records) **PROVISO SUBCOMMITTEE RECOMMENDATION:** ADD new proviso to require the department to continue to provide vital records services in each of the 46 counties that were providing those services on January 1, 2012, and allow the department to determine each locations operational schedule based on staffing resources. Fiscal Impact: No impact on the General Fund.

22.vr. (DHEC: Vital Records) For the current fiscal year, with funding appropriated to the department through state appropriations or fees collected for services, the department shall provide vital records services in each of the 46 county health departments throughout the state that were providing those services on January 1, 2012. The department may determine operational schedules for each location based on staffing resources in each area.

SECTION 23 - J12-DEPARTMENT OF MENTAL HEALTH

23.4 **DELETE** (Transfer of Patients to DDSN) Authorizes the department to transfer state funds to DDSN to cover the state match related to patients transferred from the department to DDSN. Authorize the department to use up to \$500,000 of the Patient Fee Account to help defray the cost of the transferees.
PROVISO SUBCOMMITTEE RECOMMENDATION: DELETE proviso. *The proviso is no longer in use.* Fiscal Impact: No impact on the General Fund. Requested by Department of Mental Health.

~~23.4. (DMH: Transfer of Patients to DDSN) DMH is authorized to transfer to the Department of Disabilities and Special Needs, state appropriations to cover the state match related to expenditures initiated as a result of the transfer of appropriate patients from DMH to the Department of Disabilities and Special Needs. In addition to other payments as authorized in this act, DMH is also authorized to utilize up to \$500,000 from the Patient Fee Account to help defray costs of these transferees.~~

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- 23.svp ADD** (Sexually Violent Predator Program) **PROVISO SUBCOMMITTEE RECOMMENDATION:** ADD new proviso to direct the Departments of Mental Health and Corrections to prepare a report that evaluates the feasibility of transferring the Sexually Violent Predator Program to the Department of Corrections. Require the report include population and cost projections for the next 5 years and make recommendations on opportunities to further expand the role of the private sector in operating this program. Require the report be submitted by December 31, 2012 to the chairmen of the Senate Finance and House Ways and Means Committees. Fiscal Impact: No impact on the General Fund.

23.svp. (DMH: Sexually Violent Predator Program) The Department of Mental Health and the Department of Corrections shall prepare a report evaluating the feasibility and desirability of transferring the Sexually Violent Predator Program to the Department of Corrections. This report must include population and cost projections for the next five years, and must also explore and make recommendations regarding opportunities to further expand the private sector's role in operating this program. This report shall be provided to the Chairman of the Senate Finance Committee and the Chairman of the House Ways and Means Committee by December 31, 2012.

SECTION 24 - J16-DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

- 24.5 DELETE** (Medicare Reimbursements) Authorize the department to continue to budget Medicare reimbursements to cover program operating expenses.
PROVISO SUBCOMMITTEE RECOMMENDATION: DELETE proviso. *The department no longer bills Medicare, therefore the proviso is no longer relevant.* Fiscal Impact: No impact on the General Fund. Requested by Department of Disabilities and Special Needs.

~~24.5. (DDSN: Medicare Reimbursements) The department may continue to budget Medicare reimbursements to cover operating expenses of the program providing such services.~~

- 24.11 DELETE** (DDSN: Summer Camps) Prohibits the department from closing summer camps due to budget reductions.
PROVISO SUBCOMMITTEE RECOMMENDATION: DELETE proviso. *The department does not operate or fund summer camps.* Fiscal Impact: No impact on the General Fund.

~~24.11. (DDSN: Summer Camps) The Department of Disabilities and Special Needs cannot remove any summer camps under their purview due to reductions in their budget.~~

- 24.15 DELETE** (FMAP Extension Carry Forward) Authorizes the department to carry forward increased FMAP funds and provides guidelines for the expenditure of such funds.
PROVISO SUBCOMMITTEE RECOMMENDATION: DELETE proviso. *The funds no longer exist.* Fiscal Impact: No impact on the General Fund. Requested by Department of Disabilities and Special Needs.

~~24.15. (DDSN: FMAP Extension Carry Forward) The department is authorized to carry forward the funds received as a result of the January through June 2011 federal extension of the increased FMAP. The department is authorized to use the funds to maintain current service~~

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~~levels, to support Traumatic Brain or Spinal Cord Injury Post Acute Rehabilitation, system enhancements of the assessment process and the monitoring and documentation process for home and community based services in order to increase efficiency and reduce fraud and abuse.~~

SECTION 25 - J20-DEPARTMENT OF ALCOHOL & OTHER DRUG ABUSE SERVICES

25.mmt ADD (Medicaid Match Transfer) **PROVISO SUBCOMMITTEE RECOMMENDATION:** ADD new proviso to require the department to transfer \$1,915,902 at the beginning of the fiscal year to the Department of Health and Human Services to meet federal Medicaid Match requirements for delivering alcohol and other drug abuse services to the Medicaid population. *The transfer will allow DHHS to maximize federal Medicaid match funds.* Fiscal Impact: No impact on the General Fund. Requested by Department of Alcohol and Other Drug Abuse Services.

25.mmt. (DAODAS: Medicaid Match Transfer) At the beginning of the fiscal year, the Department of Alcohol and Other Drug Abuse Services will transfer \$1,915,902 to the Department of Health and Human Services to meet federal Medicaid Match participation requirements for the delivery of alcohol and other drug abuse services to the Medicaid beneficiary population.

SECTION 26 - L04-DEPARTMENT OF SOCIAL SERVICES

26.13 DELETE (Prevent Welfare Reform Duplication of Services) States the General Assembly's intent that DSS does not duplicate services provided by the Department of Employment and Workforce and other state agencies. Directs agencies to cooperate with DSS in implementing the Family Independence Act of 1995.

PROVISO SUBCOMMITTEE RECOMMENDATION: DELETE proviso. *Proviso was implemented in the mid 1990s. The departments have an effective working relationship in this policy area, rendering the proviso obsolete.* Fiscal Impact: No impact on the General Fund. Requested by Department of Social Services.

~~**26.13.** (DSS: Prevent Welfare Reform Duplication of Services) **The intent of the General Assembly is that the Department of Social Services not duplicate services available at the Department of Employment and Workforce and other state agencies. All state agencies are directed to cooperate with DSS as it implements the Family Independence Act of 1995. Monies appropriated for the purpose of implementing the Family Independence Act of 1995, and used to hire persons or procure services for employment training purposes, shall be reported to the Governor to ensure duplication of services does not occur.**~~

26.21 AMEND (Teen Pregnancy Prevention) Requires the department to award two contracts to 501(c)(3) entities to provide teen pregnancy prevention programs and services and provides guidelines for the awarding of the contracts.

PROVISO SUBCOMMITTEE RECOMMENDATION: AMEND proviso to specify that the program is effectively implemented if the program "proposed for use in the application" has published positive "peer-reviewed" behavioral outcomes by an independent nationally recognized private or government agency. *Technical clarification.* Fiscal Impact: No impact on the General Fund. Requested by Department of Social Services.

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26.21. (DSS: Teen Pregnancy Prevention) (A) From the monies appropriated for the Continuation of Teen Pregnancy Prevention, the department must award two contracts to separate private, non-profit 501(c)(3) entities to provide teen pregnancy prevention programs and services within the State.

(B) Contracts must be awarded utilizing a competitive approach in accordance with the South Carolina Procurement Code.

(C) The monies appropriated must be divided equally between the contracts and paid over a twelve month basis for services rendered. Unexpended funds shall be carried forward for the purpose of fulfilling the department's contractual agreement.

(D) Entities that have a proven and public history of having effectively implemented abstinence programs in this State may be given a preference during the contract evaluation and awarding process. For the purposes of this proviso, a program is "effectively implemented" if the program proposed for use in the application has published positive peer-reviewed behavioral outcomes by an independent and nationally recognized private or government agency demonstrating that a year after the program, program participants initiated sex at a rate of at least thirty percent lower than comparable non-program students.

(E)(1) One contract must be awarded to an entity that utilizes an abstinence first, age appropriate comprehensive approach to health and sexuality education with a goal of preventing adolescent pregnancy throughout South Carolina.

(2) (a) One contract must be awarded to an entity that uses a National Abstinence Clearinghouse (NAC) approved curricula for a minimum of one year prior to their application. NAC is the agency the federal Department of Health and Human Services has chosen to provide a comprehensive, national list of approved abstinence-only education curricula that is consistent with the A through H legislative requirements defined in Title V, Section 510(b)(2). Any entity that is awarded one of the above contracts must agree to provide data to verify the program effectiveness.

(b) The contract awarded pursuant to this item must be awarded to entities that utilize a program or evaluation process approved by, and under the supervision of, a federally approved Institutional Review Board (IRB) and have been evaluated and approved for medical accuracy by the United States Health and Human Services' Office of Adolescent Health or the Office of Adolescent Pregnancy Prevention. Contracts may also be awarded to entities that do not meet these requirements on the date of the award but the entity must meet the requirements by the end of the fiscal year or the entity must forfeit the final quarterly payment.

(c) Prior to receiving funding the entities awarded the contracts pursuant to this item must verify that the program they implement meets the Cooperative Agreement with the Centers for Disease Control Division of Adolescent School Health (CDC DASH) approved SMARTool (Systematic Method for Assessing Risk-avoidance Tool) minimum standard for abstinence curriculum evaluation or the Cooperate Agreement with the Centers for Disease Control Division of Reproductive Health Tool to Assess the Characteristics of Effective Sex and STD/HIV Education Programs.

(F) The programs implemented by the entities awarded contracts pursuant to this proviso may not violate any portion of the South Carolina Comprehensive Health Education Act when implemented in a school setting. An entity that violates any portion of the South Carolina Comprehensive Health Education Act must reimburse the State for all funds disbursed.

26.23 **AMEND** (Day Care Facilities Supervision Ratios) Maintains staff-child ratios in day care facilities at the June 24, 2008 levels.

PROVISO SUBCOMMITTEE RECOMMENDATION: AMEND proviso to change Fiscal Year "2011-13" to "2012-13." Fiscal Impact: No impact on the General Fund.

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26.23. (DSS: Day Care Facilities Supervision Ratios) For Fiscal Year ~~2011-12~~ 2012-13, staff-child ratios contained in Regulations 114-504(B), 114-504(C), 114-524(B), and 114-524(C) shall remain at the June 24, 2008 levels.

SECTION 27 - L24-COMMISSION FOR THE BLIND

27.2 **DELETE** (Braille Production and Telecommunications Revenue) Authorizes Adult Adjustment and Training Center revenues to be retained by the commission and used for the production costs of the facility.

PROVISO SUBCOMMITTEE RECOMMENDATIONS: DELETE proviso. *No longer needed since Code of Federal Regulations, Title 34, Part 361.63 defines this revenue as Program Income.* Fiscal Impact: No impact on the General Fund. Requested by Commission for the Blind.

~~27.2.(BLIND: Braille Production and Telecommunications Revenue) Revenues derived from the production of Braille and provision of services by clients of the Adult Adjustment and Training Center may be retained by the commission and used in the facility for production costs.~~

SECTION 89 - X90-GENERAL PROVISIONS

89.16 **AMEND** (Allowance for Residences & Compensation Restrictions) Authorizes specific positions to occupy agency-owned residences without charge and provides compensation guidelines

PROVISO SUBCOMMITTEE RECOMMENDATION: AMEND proviso delete references to the Department of Mental Health employees. *The department no longer provides housing for employees.* Fiscal Impact: No impact on the General Fund. Requested by Department of Mental Health.

89.16. (GP: Allowance for Residences & Compensation Restrictions) That salaries paid to officers and employees of the State, including its several boards, commissions, and institutions shall be in full for all services rendered, and no perquisites of office or of employment shall be allowed in addition thereto, but such perquisites, commodities, services or other benefits shall be charged for at the prevailing local value and without the purpose or effect of increasing the compensation of said officer or employee. The charge for these items may be payroll deducted at the discretion of the Comptroller General or the chief financial officer at each agency maintaining its own payroll system. This shall not apply to the Governor's Mansion, ~~nor for department owned housing used for recruitment and training of Mental Health Professionals,~~ nor to guards at any of the state's penal institutions and nurses and attendants at ~~the Department of Mental Health, and~~ the Department of Disabilities and Special Needs, and registered nurses providing clinical care at the MUSC Medical Center, nor to the Superintendent and staff of John de la Howe School, nor to the cottage parents and staff of Wil Lou Gray Opportunity School, nor to full-time or part-time staff who work after regular working hours in the SLED Communications Center or Maintenance Area, nor to adult staff at the Governor's School for Science and Mathematics who are required to stay on campus by the institution because of job requirements or program participation. The presidents of those state institutions of higher learning authorized to provide on-campus residential facilities for students may be permitted to occupy residences on the grounds of such institutions without charge.

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Any state institution of higher learning may provide a housing allowance to the president in lieu of a residential facility, the amount to be approved by the Budget and Control Board.

That the following may be permitted to occupy residences owned by the respective departments without charge: ~~the Director of the Department of Mental Health;~~ the Farm Director, Farm Managers, and Specialists employed at the Wateree River Correctional Institution; the South Carolina State Commission of Forestry fire tower operators, forestry aides, and caretaker at central headquarters; the Department of Natural Resources' Game Management Personnel, Fish Hatchery Superintendents, Lake Superintendent, and Fort Johnson Superintendent; the Department of Parks, Recreation and Tourism field personnel in the State Parks Division; Director of Wil Lou Gray Opportunity School; President of the School for the Deaf and the Blind; houseparents for the Commission for the Blind; South Carolina Department of Health and Environmental Control personnel at the State Park Health Facility and Camp Burnt Gin; Residence Life Coordinators at Lander University; Residence Life Directors, temporary and transition employees, student interns, and emergency personnel at Winthrop University; Farm Superintendent at Winthrop University; Residence Hall Directors at the College of Charleston; Clemson University's Head Football Coach; the Department of Disabilities and Special Needs' physicians and other professionals at Whitten Center, Clemson University Off-Campus Agricultural Staff and Housing Area Coordinators; and University of South Carolina's Manager of Bell Camp Facility, Housing Maintenance Night Supervisors, Residence Life Directors, temporary and transition employees, and emergency medical personnel; TriCounty Technical College's Bridge to Clemson Resident and Area Directors. Except in the case of elected officials, the fair market rental value of any residence furnished to a state employee shall be reported by the state agency furnishing the residence to the Agency Head Salary Commission, and the Division of Budget and Analyses by October first, of each fiscal year.

All salaries paid by departments and institutions shall be in accord with a uniform classification and compensation plan, approved by the Budget and Control Board, applicable to all personnel of the State Government whose compensation is not specifically fixed in this act. Such plan shall include all employees regardless of the source of funds from which payment for personal service is drawn. The Division of Budget and Analyses of the Budget and Control Board is authorized to approve temporary salary adjustments for classified and unclassified employees who perform temporary duties which are limited by time and/or funds. When approved, a temporary salary adjustment shall not be added to an employee's base salary and shall end when the duties are completed and/or the funds expire. Academic personnel of the institutions of higher learning and other individual or group of positions that cannot practically be covered by the plan may be excluded therefrom but their compensations as approved by the Division of Budget and Analyses shall, nevertheless, be subject to review by the Budget and Control Board. Salary appropriations for employees fixed in this act shall be in full for all services rendered, and no supplements from other sources shall be permitted or approved by the Budget and Control Board. With the exception of travel and subsistence, legislative study committees shall not compensate any person who is otherwise employed as a full-time state employee. Salaries of the heads of all agencies of the State Government shall be specifically fixed in this act and no salary shall be paid any agency head whose salary is not so fixed. Commuter mileage on non-exempt state vehicles shall be considered as income and reported by the Comptroller General in accordance with IRS regulations. As long as there is no impact on appropriated funds, state agencies and institutions shall be allowed to spend public funds and/or other funds for designated employee award programs which shall have written criteria approved by the agency governing board or commission. For purposes of this section, monetary awards, if any, shall not be considered a part of an employee's base salary, a salary supplement, or a

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perquisite of employment. The names of all employees receiving monetary awards and the amounts received shall be reported annually to the South Carolina Division of Budget and Analyses.

In the case of lodging furnished by certain higher education institutions to employees, the prevailing local rate does not apply if the institution meets the exceptions for inadequate rent described in the current Internal Revenue Code Section 119(d)(2). To meet the exception, rental rates must equal the lesser of five percent of the appraised value of the qualified campus lodging, or the average of the rentals paid by individuals (other than employees or students of the educational institution) during the calendar year for lodging provided by the educational institution which is comparable to the qualified campus lodging provided to the employee, over the rent paid by the employee for the qualified campus lodging during the calendar year. The appraised value shall be determined as of the close of the calendar year in which the taxable year begins, or, in the case of a rental period not greater than one year, at any time during the calendar year in which the period begins.

89.116 DELETE (Child Care Licensing and Inspections) Requires the DHEC and DSS directors to collaborate and develop a plan to consolidate child care center regulatory and licensing functions and to submit the plan by December 1, 2011.

PROVISO SUBCOMMITTEE RECOMMENDATION: DELETE proviso. *Report has been submitted to the General Assembly.* Fiscal Impact: No impact on the General Fund.

~~**89.116.** (GP: Child Care Licensing and Inspections) For the current fiscal year, the directors of the Department of Health and Environmental Control and the Department of Social Services shall collaborate and develop a plan for consolidation of the regulatory and licensing functions for child care centers. The directors shall submit the plan no later than December 1, 2011, to the following committees: Senate General, Senate Medical Affairs, and House Medical, Military, Public and Municipal Affairs.~~